

PTO/SB/07 (08-03)

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ATTACHED: - FEE TRANSMITTAL (PTO/SB/17), in duplicate;  
PETITION FOR THREE MONTH EXTENSION (PTO/SB/22),  
in duplicate; and  
NOTICE OF APPEAL (PTO/SB/31).

Serial No.: 10/566,876

Art Unit: 2617

Examiner: Ariel A. Balaoing

Docket No.: PU030189

TOTAL NUMBER OF PAGES INCLUDING THIS SHEET: 7

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> for FY 2007		Application Number	10/566,876
		Filing Date	February 2, 2006
		First Named Inventor	Louis Robert Litwin, Jr.
		Examiner Name	Ariel A. Balaoing
		Art Unit	2617
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	PU030189
TOTAL AMOUNT OF PAYMENT (\$)		1650.00	

METHOD OF PAYMENT (check all that apply) CUSTOMER NUMBER: 24498

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account: Deposit Account Number 07-0832 Deposit Account Name: THOMSON LICENSING LLC  
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity	Fee (\$)	Fees Paid (\$)
Each claim over 20 (including Reissues)	50	25	
Each independent claim over 3 (including Reissues)	200	100	
Multiple dependent claims	360	180	
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- or HP =	x	\$50	= \$
HP = highest number of total claims paid for, if greater than 20.			
<b>Independent Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- or HP =	x	\$200	= 0
HP = highest number of independent claims paid for, if greater than 3.			

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)	Fees Paid (\$)
Other (e.g., late filing surcharge): FEE FOR THREE MONTH EXTENSION - \$1110.00	\$1650.00
FEE FOR NOTICE OF APPEAL - \$540.00	

SUBMITTED BY					
Name (Print/Type)	JOSEPH J. OPALACH	Registration No. (Attorney/Agent)	35,229	Telephone	(609) 734-6839
Signature				Date	October 27, 2009

This collection of information is required by 37 CFR 1.130. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is designed to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460. If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

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<b>FEE TRANSMITTAL</b> for FY 2007		Application Number	10/566,876
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		Examiner Name	Ariel A. Balaoing
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Total Claims: \_\_\_\_\_ or HP = \_\_\_\_\_ x \$50 = \$\_\_\_\_\_ Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Independent Claims: \_\_\_\_\_ or HP = \_\_\_\_\_ x \$200 = \$\_\_\_\_\_ Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

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Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x	_____	_____

4. OTHER FEE(S)

Other (e.g., late filing surcharge):	Fees Paid (\$)
FEE FOR THREE MONTH EXTENSION - \$1110.00	
FEE FOR NOTICE OF APPEAL - \$540.00	
	\$1650.00

SUBMITTED BY

Name (Print/Type)	JOSEPH J. OPALACH	Registration No. (Attorney/Agent)	36,229	Telephone	(609) 734-6839
Signature	October 27, 2009				

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-4199 and select option 2.